

NOV 19 2004

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:

NORAKER

Serial No.: 10/622,919

Filed: July 17, 2003

Atty. File No.: 1162-227

For: FISHING TACKLE PACK

M.S. AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313

) Group Art Unit: 3643

) Confirmation No.: 2754

) Examiner: Rowan, K.

AMENDMENT AFTER FINAL

## CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted  
to the U.S. Patent and Trademark Office (Fax No. 703/672-  
6206) on 11/19/04

SHERIDAN ROSS P.C.

KATHLEEN MCINNISH

Dear Sir:

Applicant submits this Amendment After Final to address the Office Action having a mailing date of September 21, 2004. Authorization to charge Deposit Account No. 19-1970 in the amount of \$44 as payment of the fee incurred for adding one independent claim in excess of those previously paid for is hereby given. Please charge any underpayment or credit any overpayment to Deposit Account No. 19-1970. Reconsideration and withdrawal of the rejections of the claims are respectfully requested in view of the following amendments and remarks.

11/22/2004 CCOFER 00000001 191970 10622919

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# PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

1162-227

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	22	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	22 minus 20 =	2
INDEPENDENT CLAIMS	2 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2.

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	23	23	-
Independent	4	3	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			=
Independent			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			=
Independent			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

RATE	FEE
BASIC FEE	375.00
X\$ 9=	18.75
X42=	
+140=	
TOTAL	393.75

OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	750.00
X\$18=	
X84=	
+280=	
TOTAL	

SMALL ENTITY TYPE ☐

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	49.50
+140=	
TOTAL ADDIT. FEE	49.50

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.